



Application for Grant Funding

Return completed form to the Wal-Mart Store or SAM'S CLUB where you obtained this application.

Location Use Only:

Please Select Grant Program:

Grant Type: ☐ Matching ☐ Bonus ☐ Literacy ☐ Safe Neigh. Heroes ☐ Enviro ☐ Grandprts Day (div 01) ☐ Civic / Veterans ☐ Holiday (div 01)

Location #: 2119 City: _____ ST: _____ Type: WM / SAM'S / DC / TO / Other _____

Today's Date: 1/17/05 Date of Event: 1/1/05 Fundraiser Location: ☐ On Site ☒ Off Site Amount Requested: \$2250.00

How many associates will / did participate in the event? _____ (not required if held on site)

Specifically, what is the fundraiser? (matching grants only) Safe Neighbor Heroes grant.

Milpitas Police Dept work on the city safety the community involvement & our safety

Managers Name (signed and printed): _____

Community Involvement Associate: Shirley Wilson 1/17/05

This application and a receipt letter (matching grants only) must be completed and ON FILE at your location for ALL grants

To be Completed by the Organization:

Select one: IRS designated ☐ 501c3 organization * OR: ☐ 501c4 ☐ 501c19 organization* (eligible for Civic and Veterans Grant ONLY)

* Must provide a valid Federal Tax ID / EIN #. Number will be validated using the IRS publicly available database

OR: ☐ Faith Based Organization ** ☐ Public School ☐ Federal, State or Local Government Agency

** Faith Based Organizations must be conducting projects that benefit the community as a whole. Grants cannot solely or primarily benefit, directly or indirectly, their adherents or members

Organization Name: Milpitas Police Dept Federal 501c3, c4 or c19 Tax ID (EIN) #: (9 digits) _____

Address: 1275 N. Milpitas Blvd City: Milpitas ST: Ca Zip: 95035

Contact Name: Dennis Graham Contact Phone: (408)-586-2302

What service does your organization provide to the community? Law enforcement and crime prevention

Specifically, how will funds from this grant be utilized in your local community? Crime prevention among youth

Which of the following groups will this funding primarily benefit? This information is used solely to track our funding to specific diverse community groups and is NOT considered during the grant review or approval process. Please select only the most appropriate:

☐ Hispanic ☐ African American ☐ Asian American ☐ Native American ☐ General Population (benefits the entire community)

Will these grant funds directly benefit your LOCAL community? ☒ Yes ☐ No

Complete for Grandparents Day ONLY:

Number of youth involved: _____ Number of senior citizens involved: _____

Organization Representative: By signing below I acknowledge that this form represents a request for funding, and is not a guarantee of funding. Final approval is subject to the guidelines of the Wal-Mart Foundation. All organizations holding fundraisers at any Wal-Mart Stores, Inc. location, or requesting grant funding, must abide by the rules and guidelines set forth by the location, Wal-Mart Stores, Inc., and the Wal-Mart Foundation. This request will not be processed unless signed by all parties.

Signed: [Signature] Printed: Dennis Graham Date: 1-20-05

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WAL-MART FOUNDATION

CITY OF MILPITAS POLICE DEPARTMENT

Location: 2119

Account #: 8891

SAFE NGHBD HEROES

CHECK NUMBER	CHECK AMOUNT
1013423	\$ 2,250.00

Wal-Mart Store # 2119
301 RANCH DRIVE
MILPITAS CA 95035

Don L. Guber
1-20-05

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

WAL-MART FOUNDATION
702 S.W. 8th Street
BENTONVILLE, ARKANSAS 72716

BANK OF BENTONVILLE
BENTONVILLE, AR
81-701 / 829

DATE OF CHECK	CHECK NUMBER
09/28/2004	1013423

CHECK AMOUNT
\$ *****2,250.00

Void After 180 Days

PAY TWO THOUSAND TWO HUNDRED FIFTY DOLLARS AND NO CENTS

TO THE ORDER OF CITY OF MILPITAS POLICE DEPARTMENT
MILPITAS CA

2119 - 8891

Jack P. Arizain

Senior V.P. - Finance and Treasurer

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